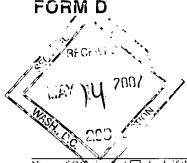
1400432



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C., 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours nor roomens	I					

SE	C USE OF	NLY
Prefix		Serial
D	ATE RECEIV	ED
	1	

Name of Offering (check if this is an amendment and name has changed, and indicate char	ange.)		
Convertible Note Offering			
	ection 4(6)	UIOE	
Type of Filing:			
A. BASIC IDENTIFICATION DATA	<u>ra</u>		()))
1. Enter the information requested about the issuer			
Name of Issuer (check if this is an amendment and name has changed, and indicate change	e.)		07054910
Realius, Inc.			1.004810
Address of Executive Offices (Number and Street, City, State, Zip	ip Code)	Telephone Nur	mber (Including Area Coue)
1124 Fresno Ave, Berkeley, CA 94707		510-381-3888	
Address of Principal Business Operations (Number and Street, City, State, Zi	Lip'Code)	Telephone Nu	imber (Including Area Code)
(if different from Executive Offices)		•	
same as above	1	same as above	
Brief Description of Business			
Online Games			
			PROCESSED
Type of Business Organization			
	other (p	lease specify):	MAY 2 4 2007
business trust limited partnership, to be formed			MAI 2 4 2007
Month Year			THOMSON
Actual or Estimated Date of Incorporation or Organization:		nated	FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation		:	TIVANOIAL
CN for Canada; FN for other foreign jurisdictio	on)		-

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no rederal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFIC	CATION DATA	
2. Enter the information requested for the following:		
Each promoter of the issuer, if the issuer has been organized within the	past five years;	
Each beneficial owner having the power to vote or dispose, or direct the v	ote or disposition of, 10% or more of	a class of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporat 	e general and managing partners of p	partnership issuers; and
• Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer	General and/or Managing Partner
Full Name (Last name first, if individual) Charles Teller	·	
Business or Residence Address (Number and Street, City, State, Zip Code) 1124 Fresno Ave, Berkeley, CA 94707	-	
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer 🔽 Director	General and/or Managing Partner
Full Name (Last name first, if individual) Daniel Katz		
Business or Residence Address (Number and Street, City, State, Zip Code) 262 Contral Park West, Apt 11C, New York, NY 10024		
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply Promoter Beneficial Owner E	xecutive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Check Box(es) that Apply: Promoter Beneficial Owner E	xecutive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		

					В, Г	NFORMAT	ION ABOU	T OFFERI	NG				-
1.	Has the	issuer solo	d, or does t	he issuer ii	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes [No ⊠
	Answer also in Appendix, Column 2, if filing under ULOE.												
2.	2. What is the minimum investment that will be accepted from any individual?											\$_ 25 ,	00.00
											Yes	No	
	 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 												X
4.	eommis If a pers or state:	ssion or sim son to be lis s. list the na	ilar remune sted is an as: ame of the b	ration for s sociated pe proker or do	solicitation erson or age caler. If me	of purchase ent of a brok	ers in connu er or deale : (5) person	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	rectly, any he offering, with a state sons of such		
Ful	ll Name (Last name	first, if ind	ividual)							-		
Bu	siness or	Residence	Address (N	Sumber and	J Street, C	ity. State. Z	ip Code)			······································	,	-	
Nai	me of As	sociated B	roker or De	aler						-			
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						-
	(Check	"All State:	s" or check	individual	States)			,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	************	·		□ AI	1 States
	ΔL	ΔK	ΔZ	ÄR	CA	co	[CT]	DE	DC	FL	ĞΛ	Ш	[ID]
	IL	IN	IA	KS	KY	LA	ME)	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM]	NY	NC	ND	OH	OK	OR	PÁ
	RI	SC	SD	TN	TX	UT	VT	[VA]	WA	WV	WI	\overline{WY}	PR
Ful	II Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated B	roker or De	aler				<u> </u>				<u> </u>	
Sta	tes in Wh	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)							□ AI	1 States
			[A2]	[ATI]	िंदी	[col	COT	(pe)	[52]				(TE)
		AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	MS MS	MO
	MT	NE	NV	NH	NJ NJ	NM	NY	NC	ND	OH)	OK)	OR	PA
	RI	SC	SD	TN	TX	UT	VT	\overline{VA}	WA	WV	WI	WY	PR
Ful	II Name (Last name	first, if ind	ividual)	······································			_ Lane					<u></u>
Bu	siness or	Residence	: Address (Number an	d Street, C	City, State.	Zip Code)						_
Na	me of As	sociated B	roker or De	aler						· · · · · ·			
114	ine or As.	socialed in	TORCI OI ISC	arçı									
Sta						to Solicit							
	(Check	"All State:	s" or check	individual	States)		***************************************		**************			□ V1	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity	s	\$
	Common Preferred		0.00
	Convertible Securities (including warrants)	S_500,000.00	\$
	Partnership Interests		\$
	Other (Specify)		
	Total	\$_500,000.00	<u>\$_0.00</u>
	Answer also in Appendix, Column 3, if tiling under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		¢
	Answer also in Appendix, Column 4. if filing under ULOE.		Ψ
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Promissory Note	\$_0.00
	Regulation A		\$
	Rule 504	Promissory Note	\$ 0.00
	Teta!		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	[]	\$_7,500.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	-	\$
	Other Expenses (identify)	_	\$
	Total		5 7,500.00

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF P	KOCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers. Directors, & Affiliates	Payments to Others
	Salaries and fees	[] \$	s
	Purchase of real estate	[s
	Purchase, rental or leasing and installation of mach and equipment		¬ ¢	
	Construction or leasing of plant buildings and facil			
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset	ne of securities involved in this	_	_
	issuer pursuant to a merger)			
	Repayment of indebtedness			
	Working capital			
	Other (specify):		_] \$	S
			\$	ss
	Column Totals		Z \$ 0.00	✓ S 492,500.00
	Total Payments Listed (column totals added)		∠ \$_49	92,500.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furr information furnished by the issuer to any non-accer-	hish to the U.S. Securities and Exchange Commis	sion, upon writte	
!35	ier (Print or T) pe)	Signa are	Date	
	ealius, Inc.	(Inhill -	April 25, 2007	
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Cha	ırles Teller	Chief Executive Officer		

– ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K
		_	

See Appendix, Column 5, for state response,

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	Λ	
Issuer (Print or Type)	Sign ure Date	
Realius, Inc.	April 25, 2007	
Name (Print or Type)	Title (Print or Type)	_
Charles Teller	. Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

. 5 3 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No ALΑK ΑZ AR CA X x CO CT DE DC FLGA Н ID ΙL IN ĪΑ KS KY LA ME MD MA ΜI MN MS

APPENDIX

· i 2 3 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price to non-accredited Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Investors Yes State Amount Amount No MO MT NE NV NH NJ NM X NY X NC ND ОН OK OR PA RI SC SD TN TXUT VT۷٨ $W \\ A$ WVWI

APPENDIX

				APP	ENDIX						
l		2 .	3		4						
,	to non-a	d to sell accredited as in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Type of investor and explana amount purchased in State waiver		ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY					,						
PR											

